

497 Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Committee to Elect Marvin Peixoto for City Council 2010			Date of This Filing 6/2/10	Date Stamp	CALIFORNIA FORM 497 For Official Use Only 06/02/10 11:41 CLK
AREA CODE/PHONE NUMBER 510-538-2516	I.D. NUMBER (if applicable) 1304164		Report No. 497-1		
STREET ADDRESS 26906 Halifax Place			<input type="checkbox"/> Amendment to Report No. _____ (explain below) No. of Pages 1		
CITY Hayward	STATE CA	ZIP CODE 94542			

. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
6/1/10	Hayward Association of Management Employees 895 B Street, Box #401 Hayward, CA 94541	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,152.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
6/2/10	Service Employees International Union Local 1021-Candidate PAC 555 Capitol Mall, Suite 1425 Sacramento, CA 95814 ID # 1296948	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$1,152.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		<input type="checkbox"/> Check if Loan _____% Provide interest rate

Reason for Amendment: _____

*Contributor Codes
 IND – Individual
 COM – Recipient Committee (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee